# L1600184143

(Re	equestor's Name)				
(Address)					
(Ac	ddress)				
(Ci	ty/State/Zip/Phone	#)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					

Office Use Only



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#### **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT

**Gwiler LLC** 

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Matthew Palmer
(Name of Person)
Ecycling Connection
(Firm/Company)
2433 Timbercrest Cir E
(Address)
Clearwater, FL 33763
(City/State and Zip Code)

For further information concerning this matter, please call;

### Matthew Palmer

<sub>...</sub>727 \ 776-0343

(Name of Person)

(Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee and Certificate of Dissolution

□ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)

#### **MAILING ADDRESS:**

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

#### STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

I. The name of a limited I Gwiler LLC	iability company is					
2. The Articles of Organiz	ation were filed on	2016	and assigned	MIN SEP 26		
document number L160				라 26		
Note: If the date inserted	ate the dissolution if not effective date cannot be prior to or a finished this block does not meet the effective date on the Department	nore than 90 days later than da he applicable statutory filin	te document is received to	₹ or filing) 🥸		
4. A description of occurre 605,0707, Florida Statut	ence that resulted in the lines, (copy 605,0707 on bac	nited liability company's k cover letter).	dissolution pursuant	to section		
The business is no longer	viable economically.					
If there are no members activities and affairs:	, enter the name and addre Matthew Palmer	ss of the person appointed	d to wind up the com	pany's		
	2433 Timbercrest Cir	2433 Timbererest Cir E				
	Clearwater, FL 33763		<u> </u>	<del></del>		
<ol> <li>Signature of an authorized above to wind up the</li> </ol>	ed person or if there are no company's activities and a	o members, the signature	of the person appoin	tcd and		
MHD.	<del></del>	Matthew Palmer				
Signature		Printed Name				

FILING FEE: \$25.00